

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000002424

Entity Name: BAYVIEW CAPITAL GP IVB, LLC**Current Principal Place of Business:**4425 PONCE DE LEON BLVD 5TH FLOOR
CORAL GABLES, FL 33146**Current Mailing Address:**4425 PONCE DE LEON BLVD 5TH FLOOR
CORAL GABLES, FL 33146**FEI Number:** 32-0437414**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BOMSTEIN, BRIAN E
4425 PONCE DE LEON BLVD 5TH FLOOR
CORAL GABLES, FL 33146 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** BRIAN E. BOMSTEIN

04/21/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRPCOE
Name ERTEL, DAVID
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVPCOO
Name O'BRIEN, RICHARD
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVPS
Name BOMSTEIN, BRIAN E.
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVPAS
Name CARR, THOMAS F.
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name PORTUGAL, CARLOS
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name EVENSON, BRETT
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name WALDMAN, STUART
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name WILLIAMS, MARVIN
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN E. BOMSTEIN

SVP

04/21/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title SVP
Name LOMINAC, EVE
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP CONTROLLER
Name GLASSMAN, MARK
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP - CFO
Name O'NEIL, SEAN
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name PERNA, PETER
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name WAGOVICH, TAMMIE
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title FIRSTVP
Name BRIGGS, DAVID
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name CHIMIENTI, ANTONIO
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name GOTTLIEB, SHARI
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146